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# **MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS CORPORATIONS, SECURITIES & COMMERCIAL LICENSING BUREAU**

Date Received

JAN 11 2018

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(FOR BUREAU USE ONLY)

This document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.

FILED

JAN 25 2018

ADMINISTRATOR  
CORPORATIONS DIVISION

EFFECTIVE DATE:

Name

Thomas Troyer

Address

622 Oak Hills Drive

City

Brooklyn,

State

MI

ZIP Code

49230

Document will be returned to the name and address you enter above.  
If left blank, document will be returned to the registered office.

## **ARTICLES OF ORGANIZATION**

**For use by Domestic Limited Liability Companies**  
(Please read information and instructions on reverse side)

Pursuant to the provisions of Act 23, Public Acts of 1993, the undersigned executes the following Articles:

### **ARTICLE I**

The name of the limited liability company is: Wholesale Processing Systems, LLC

### **ARTICLE II**

The purpose or purposes for which the limited liability company is formed is to engage in any activity within the purposes for which a limited liability company may be formed under the Limited Liability Company Act of Michigan.

Merchant Processing Information Technology Company

### **ARTICLE III**

The duration of the limited liability company if other than perpetual is: \_\_\_\_\_

### **ARTICLE IV**

1. The name of the resident agent at the registered office is: Thomas Troyer

2. The street address of the location of the registered office is:

622 Oak Hills Drive Brooklyn

(Street Address)

(City)

, Michigan

49230

(Zip Code)

3. The mailing address of the registered office if different than above:

(P.O. Box or Street Address)

(City)

, Michigan

(Zip Code)

**ARTICLE V** (Insert any desired additional provision authorized by the Act; attach additional pages if needed.)

Signed this 11 day of January 2018

By

*Thomas Troyer, John Turner, John Ehnis*  
(Signature(s) of Organizer(s))

Thomas Troyer, John Turner, John Ehnis

(Type or Print Name(s) of Organizer(s))

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